## This Form is for INTERNAL PTO USE ONLY It does NOT get mailed to the applicant.

## NOTICE OF FILING / CLAIM FEE(S) DUE (CALCULATION SHEET)

APPLICATION NUMBER: 09/467076

## Total Fee Calculation

Total rec Calculation								
•	Fee Code	Total . # Claims	Number Extra	_x_	Fee	Fc=	=	Total
	S=Æg.				Sm. Estity	Lg. Eatity		
Basic Filing Fee	201/101		. /			160	<b>a</b>	760
Total Claims >20	203/103	54 .20 =	34	x	· .	18	a	612
Ladependent Claims >3	_ 202/102	2 -3 =	0	х		7	==	1
Multi-Dep Claim Present	204/104				**************************************	. •	a	
Surcharge	205/105	٠.			-	130	<b>e</b>	130
English Translation	139							
TOTAL FEE CALCUL	ATION .					`.		1502
Fees due upon filing	the application	: :			·	•		
Total Filing Fees Due	:= S	1507		<del></del>				
Less Filing Fees Sub	mined - S				· ·			
BALANCE DUE	= S_	1502	2					·

FORM ODE-RAM-01 (Rev. 12/97)

Office of Initial Patent Examination